

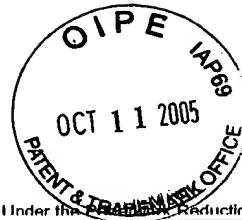


IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

The following documents have been received:
Fee Transmittal sheet; Petition and Fee for Two Months Extension of Time; and
Supplemental Amendment After Final Rejection.

Applicant : John A. T. Young, et al.
Serial No. : 09/970,076
Patent No. : N/A
Title: Receptor for B. Anthracis Toxin
Date: 9/7/2005
Our File: 960296.97745
Attorney: ZREN
Secretary: are





PTO/SB/17 (12-04)

Approved for use through 07/31/2006, OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL For FY 2005

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT	(\$) 450.00
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Complete If Known

Application Number	09/970,076
Filing Date	October 3, 2001
First Named Inventor	John A. T. Young
Examiner Name	Nita M. Minnifield
Art Unit	1645
Attorney Docket No.	960296.97745

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order None Other (please identify): _____

Deposit Account Deposit Account Number: 17-0055 Deposit Account Name: Quarles & Brady LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee

Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Small Entity	
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

2. EXCESS CLAIM FEES**Fee Description**

Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent

Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent

Multiple dependent claims

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims		Fee (\$)	Fee (\$)
				Fee (\$)	Fee Paid (\$)		
- 20 or HP =	x	=				50	25
HP = highest number of total claims paid for, if greater than 20						200	100

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
- 3 or HP =	x	=	

HP = highest number of independent claims paid for, if greater than 3

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	/ 50 =	(round up to a whole number)	x	=

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other: \$450 Two Month Extension Fee

450.00

SUBMITTED BY

Signature		Registration No. 47,897 (Attorney/Agent)	Telephone 414-277-5633
Name (Print/Type)	Zhibin Ren		Date September 7, 2005

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

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I hereby certify that this correspondence is being deposited with the United States Postal Service on the date set forth below as First Class Mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.



Date of Signature and Deposit: October 7, 2005

Zhibin Ren
Zhibin Ren

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: John A. T. Young
Kenneth A. Bradley
Robert J. Collier
Jeremy S. Mogridge

Date: October 7, 2005

Serial No.: 09/970,076

Art Unit: 1645

Filed: October 3, 2001

Examiner: Nita M. Minnfield

For: RECEPTOR FOR B. ANTHRACIS TOXIN

Docket: 960296.97745

TRANSMITTAL LETTER FOR NOTICE OF APPEAL

Commissioner for Patents
P O Box 1450
Alexandria, VA 22313-1450

Dear Sir:

In response to an Advisory Action mailed August 12, 2005, applicants filed a supplemental amendment after final rejection on September 15, 2005. As the filing of the supplemental amendment is not currently reflected in the U.S. Patent and Trademark Office (USPTO)'s record, a copy of the filing as well as the filing postcard indicating the receipt of the filing by the USPTO are enclosed herewith.

A petition for three months extension of time accompanies this notice of appeal so that the notice of appeal will be deemed to have been timely filed.

In the supplemental amendment filed on September 15, 2005, applicants petitioned for a two months extension of time by error as the appropriate amount of extension time should have been three months. Applicants did indicate in the supplemental amendment that if any other extension of time was needed, the petition should be considered as for the appropriate extension and a request to charge the appropriate extension fee to Deposit Account No. 17-0055. If the USPTO has not treated the petition in the supplemental amendment as for three months extension and charged the three-month extension fee to Deposit Account No. 17-

0055, please charge the difference between the three-month extension fee and the two-month extension fee to Deposit Account No. 17-0055.

If any other extension of time is required in this or any subsequent submission, please consider this to be a petition for the appropriate extension and a request to charge the petition fee to the Deposit Account No. 17-0055. No other fee is believed to be due in connection with this notice of appeal. However, if any fee is due, please charge the fee to the same Deposit Account No. 17-0055.

Respectfully submitted,



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